## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10020676

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			6					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			6 minus 20=		. 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		$\cdot$			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	-
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2		TOTAL		OR	TOTAL	2412
	C	LAIMS AS A	MENDED	DED - PART II							OTHER	
<u>/-</u>	646	(Column 1)		(Colur	nn 2)	(Column 3)	<u>.</u>	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 7	Minus	**	<u>20</u>	=		X\$ 9=		OR	X\$18=	
AME	Independent	* 2	Minus	***	CLAIM	- 0		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA							<u> </u>	+140=		OR	+280=	
							L	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)		WOII. FEE		'	ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	<del>iri</del>	_	=		X\$ 9=	-	OR	X\$18=	
	Independent	*	Minus	***		=	] [	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		┚╏	+140=		OR	+280=	
							-	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		_			•							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	][	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	44		2		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	]	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		┚┟			On		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140=		OR	+280=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ADDIT, FEE	
		nber Previously Pai					er fou	nd in the app	ropriate box	in cot	umn 1.	